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DEPARTMENT OF THE NAVY
U.S. NAVAL SUPPORT ACTIVITY
BAHRAIN
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NSABAHRAININST 1752.3D
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27 Apr 04

U.S. NAVAL SUPPORT ACTIVITY BAHRAIN INSTRUCTION 1752.3D

Subj: FAMILY ADVOCACY PROGRAM

Ref: (a) DOD Directive 6400.1 (NOTAL)
(b) DOD Directive 6400.1-M (NOTAL)
(c) SECNAVINST 1752.3A
(d) SECNAVINST 1754.1A
(e) SECNAVINST 1754.7
(f) OPNAVINST 1752.2A
(g) OPNAVINST 1754.1A
(h) Navy Family Advocacy Program Risk Assessment Project Handbook, Modules I-III
(i) BUMEDINST 6320.7
(j) Fleet and Family Support Center Accreditation Handbook

1. Purpose. To revise policy and program guidance and to assign responsibilities for the operation of the Family Advocacy Program (FAP) at U.S. Naval Support Activity (NSA) Bahrain, per references (a) through (j).

2. Cancellation. ASUSWAINST 1752.3C.

3. Definitions. Terms relating to the FAP are defined in references (a) through (i). For purposes of this instruction, the term "child abuse" encompasses child neglect and the term "spouse abuse" encompasses intimate partner abuse. In domestic violence incidents, couples do not have to be married to be referred to the FAP.

4. Applicability. The provisions of this instruction apply to all military personnel and Department of Defense (DOD) civilian/contract employees and their family members under the purview of NSA Bahrain.

5. Discussion. The FAP is a line-managed, multi-disciplinary program, which addresses the prevention, identification, reporting, intervention, evaluation, rehabilitation, behavioral education, counseling and follow-up of child and spouse abuse.

6. Policy

a. Child and spouse abuse are unacceptable and incompatible with the high standards of professional and personal discipline required of members of the military services and DOD civilian and contract personnel.

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Abusive behavior destroys families, detracts from military performance, negatively affects the efficient functioning and morale of military units, and diminishes the reputation and prestige of the military services in the civilian community. Accordingly, response to child and spouse abuse is a leadership issue. Commanding Officers and all leadership personnel will undertake a continuous effort to reduce and eliminate child and spouse abuse at every level of command.

b. The five primary goals of the FAP are: prevention, victim safety and protection, offender accountability, rehabilitative education and counseling, and community responsibility for a consistent and appropriate response.

c. In order to achieve the FAP goals, it is the policy of the NSA Bahrain FAP to:

(1) Conduct programs and activities that contribute to a healthy family life, prevent the occurrence of abuse and seek to restore families to a healthy, non-violent status.

(2) Identify cases of child and spouse/intimate partner abuse promptly and provide early intervention to break patterns of abusive behavior.

(3) Ensure that victims and witnesses of child and spouse abuse have access to appropriate protection, safety, care, support, case management, and educational rehabilitative services, as needed, to the extent allowable by law and resources. Ensure that victims are not re-victimized through unnecessary negative interventions.

(4) Ensure military and DOD civilian and contract offenders are held accountable by applying a range of disciplinary or administrative sanctions, as appropriate, for acts or omissions constituting child and spouse abuse.

(5) Provide rehabilitation and behavioral education and counseling to offenders, as appropriate, to stop child and spouse abuse.

(6) Ensure all FAP-related personnel receive regular and ongoing training. Establish and maintain FAP educational, training, and awareness programs.

(7) Encourage treatment/counseling in cases of child or spouse abuse committed by military, DOD civilian and DOD contract

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family members, and take appropriate action, if the maltreatment persists.

(8) Ensure appropriate confidentiality and sensitive handling of FAP case information by all involved personnel.

(9) Ensure effective coordination and cooperation among all FAP-related agencies, activities, and individuals.

(10) Cooperate with civilian authorities in addressing child and spouse abuse.

d. This instruction provides only internal guidance to protect and assist actual or alleged victims of child and spouse abuse. It is not intended to and does not create any rights, substantive or procedural, enforceable at law by any victim, witness, suspect, accused, or other person in any matter, civil or criminal. No limitations are placed on the lawful prerogatives of the Department of the Navy or its officials.

7. Program Guidance. The NSA Bahrain FAP shall be implemented in accordance with provisions of references (a) through (j).

8. Scope of Services. The following specific FAP services are available to eligible persons: prevention and awareness programs; education and training programs; information and consultation; crisis intervention; safety assessment and safety planning; victim advocacy and support services; clinical risk focused assessment; intervention planning; clinical counseling; referrals; monitoring and follow-up.

9. Action

a. Commanding Officer, NSA Bahrain shall:

(1) Ensure a comprehensive, coordinated FAP to support personnel and commands throughout the serviced area.

(2) Publish policies, instructions, and protocols to ensure the FAP operates effectively, efficiently and in compliance with requirements.

(3) Cooperate with other DOD agencies and establish Memorandum of Understanding (MOU) with such agencies, as appropriate.

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(4) Appoint a Family Advocacy Officer (FAO) for administrative management and implementation of the FAP.

(5) Establish a Family Advocacy Committee (FAC) to oversee the FAP. Appoint members in writing.

(6) Establish a Case Review Committee (CRC). Appoint members in writing.

(7) Ensure regular and ongoing FAP training for all FAP-related personnel, unit commanders, military/civilian supervisors, command FAP Points of Contact (POCs), FAC members and CRC members.

(8) Ensure installation activities, agencies, and personnel coordinate FAP-related actions to provide the highest quality program with optimal utilization of resources.

b. Family Advocacy Officer:

(1) Appointed by the Commanding Officer, NSA Bahrain. The FAO is the Executive Officer of NSA Bahrain.

(2) Provides administrative management and implementation of the FAP, in coordination with the FAC, to ensure effective operation and compliance with instructional requirements and program standards.

(3) Facilitates development, oversight, coordination, administration and evaluation of the FAP.

(4) Maintains clear lines of authority and accountability in the FAP to ensure coordination of the FAP functions and integration of the services, including: drafting installation instructions, coordinating MOUs with other DOD agencies and ensuring written case protocols and Standard Operating Procedures (SOPs).

(5) Ensures personnel are nominated, as appropriate, for appointment to the FAC and CRC.

(6) Ensures training for FAP-related personnel in accordance with reference (f). Receives regular and ongoing FAP-related training.

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(7) Notifies the Commanding Officer, NSA Bahrain and the FAP Regional Coordinator of cases of child abuse occurring in Navy-sanctioned out-of-home care settings, such as the Child Development Center and Youth Center, fatalities, and cases involving media interest or high-level command interest.

c. Family Advocacy Committee:

(1) Established by the Commanding Officer, NSA Bahrain.

(2) Chaired by the Executive Officer, NSA Bahrain and co-chaired by the chairperson of the CRC.

(3) Meets at least quarterly, more often as needed, with meeting minutes maintained to document meeting dates, agenda, attendance, and content.

(4) Includes the following members who are appointed by the Commanding Officer, NSA Bahrain:

(a) Chairperson who is the FAO.

(b) CRC Chairperson, a clinically privileged member of the Branch Medical Clinic (BMC) Bahrain staff who serves as the FAC co-chair and BMC representative.

(c) Director, Fleet and Family Support Center (FFSC).

(d) Family Advocacy Representative (FAR).

(e) Principal, Bahrain School.

(f) Security Officer or representative.

(g) Command Judge Advocate.

(h) Chaplain.

(i) Child Development/Youth Programs Administrator.

(j) Line Officer of the CRC.

(k) Naval Criminal Investigative Service (NCIS)

Agent.

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(l) Drug and Alcohol Licensed Independent Practitioner (LIP).

(m) Command Master Chief, NSA Bahrain.

(n) Psychologist, Bahrain School.

(5) Serves as the policy-making, coordinating, recommending and overseeing body and performs the following functions:

(a) Provides an ongoing needs assessment and evaluation of the FAP.

(b) Identifies long-range, intermediate, and immediate needs and initiates appropriate action.

(c) Encourages maximum participation and a team approach among all activities, agencies and personnel involved with the FAP. Assists in identifying roles and responsibilities in the installation FAP.

(d) Coordinates military and civilian interface and social service delivery.

(e) Provides recommendations for FAP policies, procedures, resources, and programs to address installation needs and issues.

(6) All FAC members must receive FAP training at least annually.

d. Family Advocacy Representative at the FFSC:

(1) Implements and manages the case management, intervention, and rehabilitative aspects of the FAP.

(2) Receives reports of known or suspected child and spouse abuse and provides intake, crisis intervention, safety/risk assessment, and safety planning.

(3) Ensures notification of appropriate military authorities, including:

(a) Reports to NCIS all incidents of child sexual abuse; child pornography; child or spouse abuse that results in a fatality or major physical injury; child or spouse abuse involving threatening with or use of a weapon; child or spouse

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abuse involving an indication of an offender's propensity or intent to inflict major physical injury; spouse sexual assault; and spouse abuse involving stalking, other threatening behavior, or strangulation. Notifies Naval Security Force of incidents that NCIS has declined to investigate. Consults with NCIS on questionable cases.

(b) Notifies the FAO of cases of child abuse occurring in Navy-sanctioned out-of-home care settings, fatalities, and cases involving media interest or high-level command interest.

(c) Notifies the service member's or DOD civilian/contract employee's Commanding Officer (or designated POC), at a minimum, of incidents of child and spouse abuse that are opened as FAP cases, received as transferred cases, or reported to an outside agency, such as the Bahrain Public Security (BPS). The service member's or DOD civilian/contract employee's Commanding Officer may be notified of other cases, depending on the outcome of the assessment of the case. Notifications should be made within two working days. In cases involving major physical injury or indication of a propensity or intent by the alleged offender to inflict major physical injury, the notifications should be made as soon as possible.

(d) Notifies the Morale, Welfare and Recreation (MWR) Department of reports of child abuse by Child Development Center or Youth Center personnel.

(e) Notifies Commander, Navy Personnel Command (COMNAVPERSCOM) (PERS-661) of all child sexual abuse cases within five working days.

(f) Notifies COMNAVPERSCOM (PERS-65 and 66) by message, within 24 hours of the initial report, of all cases of child sexual abuse alleged to have occurred in DOD-sanctioned out-of-home care settings, such as the Child Development Center and Youth Center.

(4) Utilizing the Navy Risk Assessment Model (reference (h) and subsequent guidance), determines eligibility and completes a safety assessment, safety response, risk focused assessment, and intervention plan for all reported incidents, as appropriate. Makes a reasonable effort to interview the involved parties and family members, including children.

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(5) Provides information, consultation, and assistance as needed for persons involved in reported incidents that do not meet FAP eligibility criteria.

(6) Ensures victim advocacy and support services by directly providing such services and/or by making referrals, as appropriate, for safety assessment/planning, information on available benefits and services, military victim assistance services, and individual/group support programs

(7) Serves as POC for commands concerning FAP cases and intervention/rehabilitation matters. Assists commands in coordinating actions to ensure the safety of victims and witnesses. Maintains liaison with commands to support FAP case management and treatment.

(8) Ensures provision of rehabilitation, education, and counseling for cases by directly providing such services and/or by making referrals, as appropriate.

(9) Presents all open FAP cases to the CRC for case status determinations, recommendations, monitoring, and closure.

(10) Ensures advance notifications of CRC presentations, with all appropriate information, are made to the alleged offender, victim and the service member's or DoD civilian/contract employee's command. Ensures post-CRC notifications, with all the appropriate information, are made to the service member's or DOD civilian/contract employee's command.

(11) Performs all case management tasks, including records management, in accordance with governing instructions and program standards. Coordinates case management with other involved military activities, departments, and individuals. Documents all case contacts and activities, in accordance with requirements.

(12) Provides monitoring and follow-up for open FAP cases.

(13) Serves on the FAC and CRC.

(14) Receives regular and ongoing FAP-related training.

e. Case Review Committee:

(1) Established by the Commanding Officer, NSA Bahrain in collaboration with the BMC Officer-in-Charge.

(2) Chaired by a clinically privileged member of the BMC.

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(3) Meets at least monthly, more often as needed, with meeting minutes maintained to document meeting dates, agenda, attendance and content.

(4) Normally includes not more than eight permanent members who are appointed in writing by the Commanding Officer, NSA Bahrain.

(a) Core permanent members will include the following five required positions: Line officer (O-4) or above who is not the FAO and not senior in the chain of command to any other permanent member of the CRC); physician; FAR; psychologist, psychiatrist, or clinically privileged mental health care provider; and command judge advocate. At a minimum, the core permanent members, or their alternates, must be present to conduct a CRC meeting.

(b) Other permanent members may include: the FFSC clinical counselor who is eligible for independent provider status; BMC nurse; other physicians, as appropriate; NCIS Special Agent (non-voting member), and Security Officer (non-voting).

(c) Others who may be invited as consultants in a specific case could include: Bahrain School psychologist or counselor, Security, Drug and Alcohol LIP, chaplain, clinical counselor, and Child Development/Youth Programs Administrator. Consultants are not permanent members and do not take part in the case status decision.

(d) The service member's or DOD civilian/contract employee's Commanding Officer, or command representative, shall be invited to attend the CRC during the time the member's or employee's FAP case is being discussed and decided upon. The Commanding Officer, or command representative, is not a permanent member and does not take part in the case status decision.

(e) All CRC members must receive, at a minimum, 16 hours of child and spouse abuse training within 6 months of their appointment to the CRC and 24 hours of FAP-related training on an annual basis.

(5) Performs the following functions:

(a) Reviews all available case materials on all incidents opened as FAP cases. Utilizes the Navy Risk Assessment Model in considering cases. Considers all cases initially within 90 days of the receipt of the report by FAP.

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(b) Makes a case status determination (substantiated, pending, unsubstantiated-unresolved, or unsubstantiated-did not occur) for each opened FAP. Determines, whenever possible, the offender(s) in each case. The case status determination shall be made by a simple majority of permanent voting members.

(c) Makes recommendations regarding an individual case intervention plan, based on identified risk factors, if abuse is substantiated. Considers the Child Abuse CRC Decision Matrix and Spouse Abuse CRC Decision Matrix in making recommendations. The recommendations may include educational programs, counseling, command action, and other needed interventions.

(d) Sets an assignment control flag, if appropriate, for substantiated cases involving active duty sponsors.

(e) Monitors case progress for all open cases, reviewing all open cases on at least a quarterly basis.

(f) Makes decisions regarding case status changes and case closure.

(g) Before making a case status determination, ensures alleged victims and offenders were notified at least seven days in advance of the CRC review of the case.

(h) Reviews requests for reconsideration of determinations, in accordance with the procedures for review of CRC decisions.

(i) Provides quality assurance reviews of Family in Need of Services (FINS) cases.

f. Fleet and Family Support Center:

(1) Provides FAP-related awareness, education, and training programs and materials for the entire beneficiary population, commands, and key activities, agencies, and personnel. Ensures such programs cover all required content areas.

(2) Provides prevention programs that target protective factors and risk factors related to child and spouse abuse for the entire beneficiary population and for individuals and groups at risk for abuse.

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(3) Provides FAP-related skill building and support programs/groups.

(4) Provides crisis intervention and appropriate reporting for all child or spouse abuse incidents that are identified during client contacts, utilizing the Navy Risk Assessment Model.

(a) All incidents of known or suspected child abuse must be reported to the FAR on the date received.

(b) Incidents of spouse abuse must be reported to the FAR, with the exceptions noted in Section 9.f.(5)(a)-(c), below.

(5) FFSC clinical providers report incidents of spouse abuse in accordance with the following guidelines:

(a) FFSC clinical providers are not required to report the incident if: the victim comes voluntarily to the FFSC seeking counseling; there are no current injuries requiring medical attention; the victim is responsive and capable of responding to any renewed threat of abuse; previous injuries were not major physical abuse; the victim's safety is not an immediate issue, and the victim does not want the incident reported.

(b) If FFSC clinical providers do not report a spouse abuse incident, they must encourage the victim to report to law enforcement, complete a risk assessment and safety plan, and consult with the FAR.

(c) FFSC clinical providers must report incidents of spouse abuse, if the criteria for non-reporting are not met, the victim comes to the FFSC with current injuries due to abuse (and in such cases, an immediate report to the FAR, a report to law enforcement, and a referral to the BMC are required), or the FFSC provider comes to believe that the life and/or health of the victim is in imminent danger. In cases of imminent danger, required actions include reporting to the FAR (who will then report to the command), taking necessary action to promote the safety of the victim, and documenting, with the victim, reports being made and actions being taken.

(6) Provides clinical counseling for open FAP cases and for FINS cases to address the family/partner maltreatment issues and reduce the risk factors. Coordinates such counseling with the FAR and CRC. Targets counseling services to address CRC

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recommendations. Provides, at a minimum, quarterly progress reports and closure reports on FAP cases to the FAR.

(7) Provides FAP case management, intervention, and rehabilitative services as described in Section 9.d. above.

(8) Serves on the FAC and CRC, as appropriate.

(9) Ensures clinical providers, educators, and other staff with FAP involvement receive regular and ongoing FAP-related training.

(10) Provides FAP victim advocacy services including: safety assessment/planning, information on available benefits and services, referral to military victim assistance services, referral to individual/group support programs, transportation for clinical/medical appointments, and accompaniment to court proceedings.

g. Officer-in-Charge, BMC Bahrain:

(1) Supports the medical aspects of the FAP, including medical diagnosis, medical care, emergency room services, and/or referrals. Ensures reference (i) is fully implemented.

(2) Collaborates with the Commanding Officer, NSA Bahrain to establish the FAC and CRC.

(3) Recommends clinically privileged member(s) of the BMC staff to serve as Co-chairperson of the FAC and as Chairperson of the CRC.

(4) Ensures all BMC personnel report all incidents of known or suspected child and spouse abuse to the FAR on the date received. Notifies the FAR of the reported incident, while the alleged victim is in the clinic, if applicable.

(5) Ensures establishment of medical crisis intervention and referral protocols for cases of child and spouse abuse.

(6) Provides for specialized rehabilitative counseling for victims and, in appropriate cases, offenders when unavailable through other military providers, in accordance with established eligibility criteria and procedures for client referral, if the staff is qualified to provide such services.

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(7) Ensures BMC personnel receive regular and ongoing FAP-related training.

h. Unit Commanding Officers:

(1) Ensure continuous efforts to reduce and eliminate child and spouse abuse are actively pursued at every level of command.

(2) Designate an appropriate officer or senior enlisted member to serve as the command FAP POC to coordinate with the FAP and monitor the status of each case. Provide the designated POC's name, telephone number, fax number, e-mail and the alternate POC's information to the FAR at initial designation and whenever changes occur.

(3) Ensure all incidents of child and spouse abuse that come to the attention of the command are promptly reported to the FAR.

(4) Ensure all incidents of child sexual abuse involving members of the command are also reported to NCIS and COMNAVPERSCOM (PERS-661 and PERS-8).

(5) Take reasonable actions to ensure the safety of active duty members, DOD civilian and contract personnel and their family, following the report and during the investigation and processing. Responsive actions should include working with the FAR to develop a safety plan and issuing, when appropriate, a Military Protection Order (MPO).

(6) Promptly hold military and DOD civilian/contract offenders accountable by applying a range of disciplinary or administrative sanctions (normally within 30 days of CRC recommendations), as appropriate, and/or by directing them to participate in a FAP-sponsored rehabilitation program.

(a) The decision to proceed with disciplinary action is a matter within the sole discretion of the member/employee's Commanding Officer. In making this determination, Commanding Officers should consider victim safety and protection issues, risk assessment, and CRC recommendations, if available.

(b) Child sexual abuse cases require special handling (reference (f)). Actions in such cases should be coordinated with COMNAVPERSCOM (PERS-661 and PERS-8) and with the FAR.

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(7) In cases of child or spouse abuse committed by military or DOD civilian/contract family members, collaborate with the FAR to encourage treatment/counseling and take any appropriate action, if the maltreatment persists.

(8) Facilitate appropriate intervention, rehabilitation, education, counseling, and support services for the service member or DOD civilian/contract employee and family. Determine the service member or DOD civilian/contract employee's eligibility for rehabilitation, considering the following factors:

(a) Member or DOD civilian/contract employee's performance and potential for productive future service.

(b) Prognosis for successful completion of educational and counseling/treatment programs, as determined by a provider with the pertinent specialized expertise in family violence issues and/or psychosexual evaluations.

(c) Extent of acceptance of responsibility for abusive behavior and genuine desire for assistance.

(d) Extent and seriousness of the abuse.

(e) Guidelines for processing child sexual abuse cases and determining eligibility for long-term rehabilitation.

(f) Other factors deemed appropriate by the command.

(9) Consider applying a range of administrative actions, including administrative processing, and/or disciplinary actions when any of the factors noted below apply. Per reference (f), the decision as to appropriate disciplinary action and administrative separation processing should be made no later than 30 days from receipt of the CRC recommendations, unless unusual circumstances exist. The factors are:

(a) The active duty member or DoD civilian/contract employee does not meet the eligibility criteria for rehabilitative services.

(b) The member or employee refuses to cooperate with or complete the rehabilitative program, does not cease abusive behavior during or after a rehabilitative program, or fails to meet the conditions of court orders or probation (after admitting the offense, being substantiated by the CRC, being found to have

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committed the offense at non-judicial punishment, or being found guilty at a criminal trial).

(c) The member or employee repeats an offense for which rehabilitative and/or behavioral education and counseling have been previously afforded.

(10) Submit informational packets and other necessary documentation on child sexual abuse cases to COMNAVPERSCOM (PERS-8).

(11) Support effective operation of the CRC by:

(a) Ensuring a command representative attends the CRC meeting when cases involving service members or DoD civilian/contract personnel attached to the command are presented.

(b) Upon receipt of the written FAP pre-CRC notification, ensure the notification is provided to the service member or DOD civilian/contract employee in a timely manner so that he/she receives written notification at least seven days in advance of the CRC meeting.

(c) Upon receipt of the FAP post-CRC determination letter, take appropriate steps to ensure: results are discussed with the service member or employee; determination is forwarded to the civilian offender, victim, or non-offending parent; service member and the civilian offender, victim, or non-offending parent sign and return his/her Statement of Rights form to the FAR, as appropriate; and the command decision regarding the recommendation(s) is forwarded, in writing, to the FAR within ten days. Appropriate steps to forward the determination and Statement of Rights to the civilian offender, victim, or non-offending parent would include a personal meeting, hand delivery of the information, or sending the information via registered mail.

(12) Ensure all command personnel receive regular and ongoing FAP-related training, to include: identification and prevention of family violence; reporting requirements; and the response to family violence by the command, the community and the FAP. Incorporate FAP awareness as a regular professional development training. Ensure unit commanders, military supervisors, senior enlisted personnel, and command FAP POCs receive additional FAP-related training.

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(13) Assign a judge advocate as the recorder in administrative separation processing boards for all child sexual abuse cases, unless compelling reasons dictate otherwise, and for spouse abuse and other child abuse cases, when reasonably available.

i. Security Personnel:

(1) Respond to incidents of child or spouse abuse on government property to restore order, protect victims, secure the crime scene, and complete an investigation, as appropriate. Specific responsibilities include taking the following actions, when appropriate: separately interviewing victims, offenders, witnesses, and any children who may be witnesses or victims; completing a safety assessment and risk assessment; assessing the need for medical attention; developing a safety plan and taking any action immediately needed to ensure safety; obtaining sworn statements; collecting evidence; and maintaining liaison with the Bahrain Public Security (BPS), as appropriate. Safety actions may include immediate notification of command and NCIS, apprehension and detainment of the alleged offender, recommendations concerning desired command actions, such as the issuance of an MPO, and contacting appropriate resources.

(2) Regarding child or spouse abuse incidents that occur in-town, Criminal Investigations will respond to assist BPS, as appropriate, and assume jurisdiction, if relinquished by BPS.

(3) Develop an implementing SOP for responding to calls involving child and spouse abuse, in accordance with the provisions of reference (f). The SOP will include guidelines for the investigation, collection of evidence, documentation, and reporting in child and spouse abuse incidents.

(4) Report all incidents of known or suspected child or spouse abuse to the FAR on the date received. Follow initial verbal reports to the FAR with written reports, upon completion.

(5) Provide desk journals of child and spouse abuse incidents to the FAR within one day of receipt of report.

(6) Serve on the FAC.

(7) Receive regular and ongoing FAP-related training.

j. Naval Criminal Investigative Service Agents:

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(1) Conduct investigations of incidents of child or spouse abuse involving major physical injury, an indication of an offender's propensity or intent to inflict major physical injury, or child sexual abuse, as appropriate. Conduct investigations in other incidents of child or spouse abuse, as appropriate.

(2) Report all incidents of known or suspected child and spouse abuse to the FAR on the date received. Provide written reports of investigations of child and spouse abuse incidents to the FAR and to the service member or DOD civilian/contract employee's command, upon completion.

(3) Conduct joint interviews of child victims with the FAR to avoid multiple interviews.

(4) Serve as the principal liaison with BPS to obtain investigative reports and to coordinate interventions. Provide information from BPS to the FAR.

(5) Serve on the FAC and CRC.

(6) Receive regular and ongoing FAP-related training.

k. Command Judge Advocate/Legal Officers Shall:

(1) Report all incidents of known or suspected child or spouse abuse, when not precluded from doing so by rules of professional conduct and privilege, to the FAR on the date received. When not reported to the FAR, alleged offenders should be encouraged to self-refer and victims should be advised regarding available resources.

(2) Provide legal advice and recommendations to the command, the FAR, and other FAP-related professionals regarding matters, including actions to ensure safety of victims, issuance of MPOs, release of information, and administrative/disciplinary actions. Provide legal assistance in the preparation of FAP-related MOUs, policies, and directives.

(3) Serve as liaison with other military and civilian legal professionals and judicial systems involved with FAP cases.

(4) Serve on the FAC and CRC.

(5) Receive regular and ongoing FAP-related training.

l. Child Development Center/Youth Center Personnel Shall:

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(1) Report all incidents of known or suspected child and spouse abuse to the FAR on the date of receipt. In addition, cases of child sexual abuse alleged to have occurred within DOD-sanctioned out-of-home care settings must be reported, by the command, within 24 hours of the initial report, via message to COMNAVPERSCOM (PERS-8, 65, and 66), in the format contained in reference (f). Cases of child physical abuse alleged to have occurred within DOD-sanctioned out-of-home care settings must be reported to COMNAVPERSCOM (PERS-65) and to NCIS, in accordance with governing instructions.

(2) Comply with all guidelines contained in governing instructions and policies concerning preventive measures, reporting of child abuse, and safety measures, including removal of alleged offenders from direct childcare duties.

(3) Coordinate actions concerning incidents of child abuse alleged to have occurred within a DOD-sanctioned out-of-home care setting with the FAR and involved law enforcement personnel.

(4) Serve on the FAC.

(5) Receive regular and ongoing FAP-related training.

m. Drug and Alcohol Program personnel:

(1) Report all incidents of known or suspected child and spouse abuse to the FAR on the date of receipt.

(2) Coordinate actions concerning FAP cases with the FAR. Maintain liaison with the FAR and provide reports of substance abuse evaluations and/or treatment to the FAR to support monitoring of FAP cases that have been referred for drug/alcohol treatment.

(3) Serve on the FAC.

(4) Receive regular and ongoing FAP-related training.

n. Chaplains Shall:

(1) Report all incidents of known or suspected child or spouse abuse, except when the abuse is disclosed during a privileged communication, i.e., as a formal act of religion or as a matter of conscience, to the FAR on the date of receipt. When not reported to the FAR, alleged offenders should be encouraged

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to self-refer and victims should be advised regarding available resources.

(2) Serve on the FAC.

(3) Receive regular and ongoing FAP-related training.

o. Command Duty Officers shall:

(1) Receive all reports of child and spouse abuse after the FAP normal working hours.

(2) Take any necessary steps to ensure safety and the provision of any needed services, including medical services, investigations, and shelter services. Coordinate actions with Security personnel, FAO, FAR, and other involved personnel, as needed. Make recommendations for safety to commands, such as issuing an MPO.

(3) Notify Security and NCIS, as appropriate.

(4) Notify the FAR immediately of all child and spouse abuse reports received during normal working hours or after hours.

p. All personnel must report any incident of known or suspected child and spouse abuse occurring on NSA Bahrain or involving military service members, DOD civilian/contract employees, and their family members (with exceptions as noted above).

(1) During normal working hours, the report will be made to the FAR and Security.

(2) After normal working hours, the report will be made to Security or the CDO, with the report made to the FAR on the next working day.

10. Additional Responsibility of NSA Bahrain Commanding Officer

a. In cases of alleged child abuse, enclosure (11) of reference (f) provides detailed guidance to assist the NSA Bahrain Commanding Officer with ensuring that the safety of the victim is of paramount concern and that appropriate actions are taken.

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b. The NSA Bahrain Commanding Officer has additional responsibilities overseas, in the absence of Child Protective Services and a Family Court. As such, he or she may take the following actions:

(1) Order that a child be interviewed, without the parents' consent, if it is determined that the interview is required to protect the health and safety of the child, and the parents are uncooperative.

(2) Temporarily remove the child from the home, without parental consent, in situations where there is substantial reason to believe that the life and/or health of the child is in real and present danger. It is also appropriate when there is not a protecting and responsible adult in the home. If it is determined that removal from the parent/guardian is indicated, a written Child Removal Order (CRO) will be issued. A sample CRO is found in reference (f), enclosure (11).

(a) Removal of a child from the home is a drastic action. Every effort will be made to seek the cooperation and assistance of the parent(s) in implementing a viable plan that ensures the safety of the child.

(b) Removal decisions will be based on legal advice that takes into account all relevant facts, local laws, applicable treaties, Status of Forces Agreement, and whether Bahrain has expressed an interest in the case or relinquished jurisdiction.

(c) The consent of the parent(s) allowing removal of the child for treatment and care will be requested and, if possible, obtained, prior to removal

(3) If it is determined that a child is in physical danger, and the parents are unavailable or uncooperative, authorize the OIC of the BMC to provide required medical care, without parental authorization. Involvement of a parent or sponsor in the treatment process will always be sought to increase understanding and reduce resistance to medical care; however, this consideration will not be permitted to inappropriately conflict with identified victim safety concerns.

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(4) Revoke command sponsorship, direct early return of family members to the United States or recommend permanent change of station orders for the sponsor.


J. M. SMITH

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List I, II